

**Effective October 1, 2000**

Application or Docket Number

09/847991

0984399

(Column 1)

(Column 2)

	(Column 1)	(Column 2)
TOTAL CLAIMS	27	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	27 minus 20 =	7
INDEPENDENT CLAIMS	5 minus 3 =	2
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
	27	Minus	27	
	5	Minus	5	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

**SMALL ENTITY**  
**TYPE** ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	355.00	OR	BASIC FEE	710.00
XS 9=	63.00	OR	XS18=	
X40=	80.00	OR	X80=	
+135=		OR	+270=	
TOTAL	498.00	OR	TOTAL	

**SMALL ENTITY OR**

**OTHER THAN  
SMALL ENTITY**

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$18=	
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X518=	
X80=	
+270=	
TOTAL	
ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X3 9=	
X40=	
+135=	
TOTAL ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$18=	
X\$60=	
+270=	
<b>TOTAL</b>	
<b>ADDITIONAL FEE</b>	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3."

\* The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.